

Reset Form

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Miller for Auditor

IMPORTANT: Indicate by # type of committee you are reporting for: 5(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Joel D. Miller

Political Party (if applicable)

Democrat

Office Sought

Linn County Auditor

District (if Senate or House)

RECEIVED
JUL 18 2008

FORM

DR-2

(Rev. 12/2005)

DISCLOSURE
REPORT

For Office Use Only

Comm. # _____

Logged In _____

Scanned _____

Computer _____

Audited _____

File with:

Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-3701

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

SIGNATURE OF PERSON FILING REPORT

319-393-0533

TELEPHONE

DATE SIGNED

I AM FILING A July 19, 2008

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # 1☒ CHECK IF AMENDMENT TO REPORT DATED July 19, 2008☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

November 4, 2008

County & Local Committees, enter County in
which Election is held
Linn

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

2,513.87

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....

1,903.00

Schedule F: Loans Received total (Attach Schedule F).....

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H).....

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

4,416.87

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....

4,381.92

Schedule F: Loan Repayments total (Attach Schedule F).....

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....\$

34.95

**UNPAID BILLS (From Schedule D - Attach Schedule D).....\$

0.00

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$

301.81

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$

100.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Miller for Auditor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
05/19/08	ID# CK# 7156	Andrew Craig Peterson 3461 Oriole CT NE Cedar Rapids, IA 52402		\$50.00	<input type="checkbox"/>
05/19/08	ID# CK# 5716	Scott Olson 6467 Quail Ridge DR SW Cedar Rapids, IA 52404		50.00	<input type="checkbox"/>
05/19/08	ID# CK# 5932	Barbara Geinzer 908 S 2nd Ave W Newton, IA 50208		50.00	<input type="checkbox"/>
05/19/08	ID# CK# 835	Joyce J. Neilsen 2702 Q Ave. NW Cedar Rapids, IA 52405		30.00	<input type="checkbox"/>
05/15/08	ID# CK# 6899	Scott C. Peterson 319 3rd ST SE Mount Vernon, IA 52314		25.00	<input type="checkbox"/>
05/21/08	ID# CK# 12220	Robert D. Becker 2838 Alleghany Drive NE Cedar Rapids, IA 52402		75.00	<input type="checkbox"/>
05/21/08	ID# CK# Cash	Gary Connors - Boc 4014 Lakeview Dr. SW Cedar Rapids, IA 52404		60.00	<input type="checkbox"/>
05/22/08	ID# CK# 2090	David Oliver 3745 Cottage Grove AVE Cedar Rapids, IA 52403		50.00	<input type="checkbox"/>
05/22/08	ID# CK# 1202	Frank Reynolds 111 19th ST Marion, IA 52302		25.00	<input type="checkbox"/>
05/23/08	ID# CK# 2998	Jimmy C. Ebron 18 Bedford Court Douglasville, GA 30134		20.00	<input type="checkbox"/>
SUB-TOTAL				\$ 435.00	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 3
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Miller for Auditor

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05/23/08	ID# CK# Cash	Victor and Pat Klopfenstein 5540 Hunters Ridge Court Marion, IA 52302		\$20.00	<input type="checkbox"/>
05/27/08	ID# CK# 2522	Gordon D Thompson 3417 Sycamore CT NE Cedar Rapids, IA 52402		100.00	<input type="checkbox"/>
05/27/08	ID# CK# 4896	Jim Brown 420 Phaeton Drive Robins, IA 52328		500.00	<input type="checkbox"/>
05/27/08	ID# CK# 1901	Michael J. Engelken 7625 Normandy DR. NE Cedar Rapids, IA 52402		200.00	<input type="checkbox"/>
05/29/08	ID# CK# 3749	Janet S. Johnson 3121 Ridgemore DR SE Cedar Rapids, IA 52403		25.00	<input type="checkbox"/>
05/29/08	ID# CK# 7913	C Lloyd Holeck 2190 24th St. Marion, IA 52302		20.00	<input type="checkbox"/>
05/29/08	ID# CK# 3504	Tim Cunningham 7200 1st Ave NW Cedar Rapids, IA 52405		50.00	<input type="checkbox"/>
05/29/08	ID# CK# Cash	Ghassan El-Farhan Halloush 1930 St. Andrews Court NE Cedar Rapids, IA 52402		100.00	<input type="checkbox"/>
05/29/08	ID# CK# Cash	Vickie Heft 3014 Circle Hill CT NE Cedar Rapids, IA 52402		50.00	<input type="checkbox"/>
05/29/08	ID# CK# Cash	Carole Maher 4980 Kesler Rd NW Cedar Rapids, IA 52405		8.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1073.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Miller for Auditor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
06/02/08	ID# CK# 4470	James A Sattler 2010 Timber Wolf Trl. SE Cedar Rapids, IA 52403-7052		\$200.00	<input type="checkbox"/>
06/02/08	ID# CK# 1182	Jason J. Miller 333 E Enos DR. NO. 153 Santa Monica, CA 93454-7237	Son	100.00	<input type="checkbox"/>
05/29/08	ID# CK# 5052	Sharon K Gonzalez 3805 Tarp DR SW Cedar Rapids, IA 52404		25.00	<input type="checkbox"/>
05/29/08	ID# CK# 5753	Janet K Aldrich 6406 E. Cemetery RD SW Cedar Rapids, IA 52404		25.00	<input type="checkbox"/>
06/30/08	ID# CK# 1214	Frank Reynolds 111 19th ST Marion, IA 52302		25.00	<input type="checkbox"/>
06/02/08	ID# CK# Cash	Miscellaneous Contribution		20.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 395.00	
TOTAL (if last page of this schedule)				\$ 1903.00	

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Miller for Auditor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/19/08	ID# CK# Paypal	Paypal service fee for contribution collection	Service Fee	\$ 1.91
05/27/08	ID# CK# 2099	Linn County Auditor 930 1st Street SW Cedar Rapids, IA 52404	Voter maps and materials	37.50
05/27/08	ID# CK# 2101	Gazette Co 500 3rd Avenue SE Cedar Rapids, IA 52401	Advertising	1,200
05/29/08	ID# CK# 2103	United States Post Office 1380 60TH Street NE Cedar Rapids, IA 52402-9802	Postage - Advertising mailing	788.83
05/29/08	ID# CK# 2102	AdCraft Printing 309 5th Ave SE, P.O. Box 246 Cedar Rapids, IA 52406	Postcards, mailmerge and Flyers	598.90
06/02/08	ID# CK# 5010	Landmark Strategies, Inc. 6225 Brandon Avenue, Suite 305 Springfield, VA 22105	Automated Calls	300.78
06/02/08	ID# CK# 2105	WMT 3971 Collections Center Drive Chicago, IL 60693	Radio Advertising	272.00
06/02/08	ID# CK# 2100	Clear Channel - Cedar Rapids 600 Old Marion Road NE Cedar Rapids, IA 52402	Radio Advertising	850.00
SUB-TOTAL				\$ 4049.92
TOTAL (if last page of this schedule)				\$ 0.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
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☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Miller for Auditor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
06/03/08	ID# CK# 2104	Z102.9 - KZIA - FM 1110 26th Ave SW Cedar Rapids, IA 52404-3430	Radio Advertising	\$ 332.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 332.00
TOTAL (if last page of this schedule)				\$ 4381.92

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Miller for Auditor

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
05/16/08	Joel Miller 375 Phaeton Dr Robins, IA 52328	Candidate	Velcro Strips Lowes	\$ 28.59	<input type="checkbox"/>
05/21/08	Joel Miller 375 Phaeton Dr Robins, IA 52328	Candidate	Postage	3.50	<input type="checkbox"/>
05/27/08	Joel Miller 375 Phaeton Dr Robins, IA 52328	Candidate	Printer Ink Refills Rapid Refill Ink	14.58	<input type="checkbox"/>
05/27/08	Joel Miller 375 Phaeton Dr Robins, IA 52328	Candidate	Flyer Copies Impressions	125.88	<input type="checkbox"/>
5/30/08	Joel Miller 375 Phaeton Dr Robins, IA 52328	Candidate	Telephone lines Phone bank - IA Telecom	129.26	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 301.81	
TOTAL (if last page of this schedule)				\$ 301.81	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)

Reset Form

SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAYED
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Miller for Auditor

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 100.00**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
No Activity			\$ 0.00

TOTAL (PART I) \$ 0.00**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
No Activity			\$ 0.00

TOTAL CASH REPAYMENTS (PART II) \$ 0.00From Schedule E -- TOTAL LOANS FORGIVEN \$ 0.00TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 100.00

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